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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself				
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	You	r full name				
	your	e the name that is on government-issued ure identification (for mple, your driver's	Joann First name	First name		
		nse or passport).	Middle name	Middle name		
	Bring your picture identification to your meeting with the trustee.		King Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.		other names you have d in the last 8 years				
		ude your married or den names.				
3.	you num Indi	y the last 4 digits of r Social Security ober or federal vidual Taxpayer otification number	xxx-xx-8790			

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Debtor 1 Joann King _____ Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
		EINs	EINs			
5.	Where you live	40 Lanark Ave Newark, NJ 07106-1022	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
-		Essex	County			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition,	Check one: ☐ Over the last 180 days before filing this petition, I			
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Joann King Document Page 3 of 51 Case number (if known)

ar	Tell the Court About	our B	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing riate box.	for Bankruptcy		
	choosing to file under	☐ Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		■ C	hapter 13						
3.	How you will pay the fee		about how yo	u may pay. Typi attorney is subn	cally, if you are paying the fee	neck with the clerk's office in your local coust byourself, you may pay with cash, cashier' behalf, your attorney may pay with a credit	s check, or money		
					allments. If you choose this o	ption, sign and attach the Application for Ir	ndividuals to Pay		
						otion only if you are filing for Chapter 7. By			
				out is not required to, waive your fee, and may do so only if your income is less than 150% of the offic applies to your family size and you are unable to pay the fee in installments). If you choose this option					
			the Application	on to Have the C	Chapter 7 Filing Fee Waived (C	Official Form 103B) and file it with your peti	tion.		
 Have you filed for bankruptcy within the No.									
	last 8 years?	□ Ye			VAII.	0			
			District						
			District		When				
			District		When	Case number			
10.	Are any bankruptcy	■ No	 o						
	cases pending or being filed by a spouse who is	□ Ye	∋ s.						
	not filing this case with you, or by a business partner, or by an affiliate?								
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
	_								
11.	Do you rent your residence?	■ No	o. Go to li	ine 12.					
		□ Ye	es. Has yo	ur landlord obta	ined an eviction judgment aga	ainst you and do you want to stay in your re	esidence?		
				No. Go to line 1	12.				
				Yes. Fill out <i>Init</i> bankruptcy peti		on Judgment Against You (Form 101A) and	d file it with this		

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Deb	otor 1 Joa	nn King			Documei	nt 	Page	4 01 51	Case number (if known	1)		
Par	t 3: Repo	rt About Any Bu	sinesses	You Own	as a Sole Proprieto	r						
12.		sole proprietor or part-time	■ No.	Go to	Part 4.							
			☐ Yes.	Name	and location of busin	ess						
	A sole prop	rietorship is a										_
	an individu			Name	of business, if any							
	sole propri	more than one etorship, use a neet and attach		Numb	er, Street, City, State	& ZIP (Code					
	it to this pe			Check	the appropriate box	to desc	ribe your	business:				
					Health Care Busine	ss (as c	defined in	11 U.S.C.	§ 101(27A))			
					Single Asset Real E	state (a	as defined	l in 11 U.S.	C. § 101(51B))			
					Stockbroker (as def	ined in	11 U.S.C.	§ 101(53A	A))			
					Commodity Broker	(as defi	ned in 11	U.S.C. § 1	01(6))			
					None of the above							
13.		ing under I of the y Code and are II business	deadline operation	s. If you in	dicate that you are a ow statement, and fed	small b	usiness d	ebtor, you	are a small business of must attach your most any of these documen	recent balaı	nce sheet, st	tatement of
	For a defin	ition of small	■ No.	I am r	ot filing under Chapte	er 11.						
	business of U.S.C. § 10	ebtor, see 11 01(51D).	□ No.	I am fi Code.		I, but I a	am NOT a	a small bus	siness debtor according	to the defin	nition in the E	Bankruptcy
			☐ Yes.	I am f	ling under Chapter 1	l and la	am a sma	II business	debtor according to th	e definition i	in the Bankr	uptcy Code.
Par	Peno	rt if You Own or	Have Ans	, Hazardo	us Property or Any	Droner	ty That N	oods Imm	ediate Attention			
				, Hazarao	ds i roperty or Any	i iopei	ty matri	ccus iiiiii	culate Attention			
14.		n or have any nat poses or is	No.									
	alleged to of immine	pose a threat nt and	☐ Yes.	What is	he hazard?							
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?				iate attention is why is it needed?							
	For examp perishable	le, do you own goods, or										

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Joann King

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Case number (if known)

Part 5: Exp

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Joann King **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **2**5,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joann King Signature of Debtor 2 Joann King Signature of Debtor 1 Executed on Executed on July 29, 2016 MM / DD / YYYY MM / DD / YYYY

Debtor 1

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Debtor 1 Joann King Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Harvey	I Marcus	Date	July 29, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Harvey I M	larcus		
Printed name			
Law Office	es of Harvey I. Marcus		
Firm name	<u> </u>		
250 Pehle	Avenue		
Suite 200			
Saddle Br	ook, NJ 07663		
Number, Street,	City, State & ZIP Code		
Contact phone	201-384-2200	Email address	HIM@lawmarcus.com
8635			
Parnumbar 9 C	toto		

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		Document	Page 8 of 51	
Fill in this inform	nation to identify your	case:		
Debtor 1	Joann King			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		_
Case number				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	90,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,250.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	103,250.0
•ar	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	233,916.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,210.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,460.0
	Your total liabilities	\$	240,586.00
Par	t 3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,669.1
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,463.1
ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7 .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a norcona	l family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Document

Debtor 1 Joann King

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		4 040 47
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_	4,612.17

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Don't A on Cohodula E/E convetho followings	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,210.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,210.00

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtDistrict of New Jersey

In re	Joann King		Case No.	
	-	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPI	ENSATION OF ATTORN	EY FOR DE	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 203 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,500.00
	Prior to the filing of this statement I have receive	d	\$	1,500.00
	Balance Due		\$	2,000.00
2.	\$_310.00 of the filing fee has been paid.			
3. ′	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. ′	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed con	mpensation with any other person un	less they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results.			
6.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects o	f the bankruptcy c	ase, including:
1	 a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h 	tatement of affairs and plan which m litors and confirmation hearing, and a preduce to market value; exem tions as needed; preparation ar	ay be required; any adjourned hea ption planning;	rings thereof;
7 . 1	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.	fee does not include the following se dischargeability actions, judicia	ervice: Il lien avoidance	es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	any agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in
J	uly 29, 2016	/s/ Harvey I Marcus		
	Date	Harvey I Marcus 863 Signature of Attorney	35	
		Law Offices of Harv	ey I. Marcus	
		250 Pehle Avenue Suite 200		
		Saddle Brook, NJ 0	7663	
		201-384-2200 Fax:	888-565-0403	
		HIM@lawmarcus.co	om	

	Case	16-28847-V	FP Doc 1		ed 09 :umer			Entere e 11 c	ed 09/3 of 51	30/16	5 17:2	22:48	Des	sc Main
-	in this inform	ation to identify	your case and th				1 71(1)							
Deb	otor 1	Joann King												
	_	First Name	Middle	Name			Last Nar	me			_			
	otor 2 use, if filing)	First Name	Middle	Name			Last Nar	me			_			
Unit	ted States Ban	kruptcy Court for	the: DISTRICT	OF NEV	V JERS	SEY								
		., .,									_		_	
Cas	e number						-							Check if this is an amended filing
SC n eachink	chedule ch category, se it fits best. Be mation. If more	as complete and a space is needed, a	operty	e. If two	married	l people	are filin	ig togeth	er, both are	e equal	ly respo	nsible for	supply	
nsw	ver every quest	ion.												
Part	1: Describe E	ach Residence, Bu	ıilding, Land, or Otl	ner Real	Estate \	You Ow	n or Hav	ve an Inte	rest In					
_	No. Go to Part Yes. Where is													
1.1	40	A		What is the property? Check all that apply										
	Street address, if	available, or other desc	cription	Dupley or multi-unit building the am				not deduct secured claims or exemptions. Put amount of any secured claims on Schedule D: ditors Who Have Claims Secured by Property.			ims on Schedule D:			
	Newark	NJ	07106-1022			actured (or mobile	e home			rent val	ue of the erty?		urrent value of the ortion you own?
	City	State	ZIP Code			ment pro	perty				\$9	0,000.00		\$90,000.00
		☐ Other (such				ch as fe	cribe the nature of your ownership interest the as fee simple, tenancy by the entireties, or e estate), if known.							
	Essex				Debtor	r 2 only								
County				_ Check					(see inst	ck if this is community property nstructions) local				
			rtion you own fo Part 1. Write that									=>		\$90,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

	Cas	se 16-28	847-VFP Do	oc 1 Filed C Docume)9/30/16 ent Pa	Entered 0 age 12 of 51)9/30/1 1	6 17:22:48	Desc	Main
Del	otor 1 <u>J</u>	oann King					Case nur	mber (if known) _		
3. C	ars, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycl	les					
] No									
	Yes									
3.	1 Make:	Ford		Who has an inte	erest in the pro	perty? Check one		o not deduct secure e amount of any se		
	Model:	Edge		Debtor 1 only				reditors Who Have		
	Year:	2007		Debtor 2 only			С	urrent value of the	Curre	nt value of the
		nate mileage:	100000	Debtor 1 and			eı	ntire property?	portio	on you own?
	Other inf	ormation:		At least one of	if the debtors an	nd another				
				Check if this (see instructions		property		\$5,000.0	<u> </u>	\$5,000.00
	pages you	have attach	f the portion you ow led for Part 2. Write	that number here						\$5,000.00
6. F	lousehold	goods and		·		items?			portion Do not o	t value of the you own? deduct secured or exemptions.
_	Examples: □ No	Major appliar	nces, furniture, linens	, china, kitchenwai	re					
_	⊒ No ■ Yes. De	scribe								
_	— 103. DC	301100								
			Used Househol	d Good and Fu	rnishings					\$500.0
ı		Televisions a including cel	and radios; audio, vido I phones, cameras, m			it; computers, pri	inters, sca	nners; music coll	ections; ele	ectronic devices
		Antiques and	figurines; paintings, ions, memorabilia, co		work; books, į	pictures, or other	r art object	s; stamp, coin, or	baseball o	eard collections;
	⊒ No ⊒ Yes. De	scribe								
	Examples:	for sports a Sports, photo musical instr	ographic, exercise, ar	nd other hobby equ	uipment; bicyc	cles, pool tables,	golf clubs	, skis; canoes and	d kayaks; d	earpentry tools;
	■ No □ Yes. De	ecribo								
	Firearms		e chataune ammuni	tion and rolated a	auinment					
	■ No ■ Yes. De		s, shotguns, ammuni	non, and related ed	quipinent					

Official Form 106A/B Schedule A/B: Property page 2

Filed 09/30/16 Case 16-28847-VFP Doc 1 Entered 09/30/16 17:22:48 Page 13 of 51
Case number (if known) Document Debtor 1 Joann King 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$900.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$50.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... \$300.00 Santander 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

Official Form 106A/B

□ No

page 3

\$7.000.00

Atlantic Health

%

Doc 1 Filed 09/30/16 Entered 09/30/16 17:22:48 Case 16-28847-VFP Page 14 of 51
Case number (if known) Document Debtor 1 Joann King 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information..

Debtor ·		-VFP Doc 1	Filed 09/30/1 Document	6 Entered 09/30/16 17:22 Page 15 of 51 Case number (if know	
	•		alth savings account (H	SA); credit, homeowner's, or renter's insu	ırance
□ Ye	es. Name the insurance o	company of each poli Company name:	cy and list its value.	Beneficiary:	Surrender or refund value:
If you som	neone has died.	a living trust, expect p		urance policy, or are currently entitled to i	receive property because
Exa ■ No	mples: Accidents, emplo	yment disputes, insu		or made a demand for payment o sue	
■ No	•		very nature, including	counterclaims of the debtor and rights	s to set off claims
■ No	financial assets you di o es. Give specific informa	•			
	d the dollar value of all Part 4. Write that num			ventries for pages you have attached	\$7,350.00
Part 5:	Describe Any Business-R	elated Property You O	wn or Have an Interest In	List any real estate in Part 1.	
	ou own or have any legal o	or equitable interest in	any business-related pro	perty?	
	Go to Part 6 Go to line 38.				
Part 6:	Describe Any Farm- and C If you own or have an intere	Commercial Fishing-Rest in farmland, list it in F	elated Property You Own Part 1.	or Have an Interest In.	
	vou own or have any lead No. Go to Part 7.	gal or equitable inte	erest in any farm- or co	ommercial fishing-related property?	
Part 7:	Describe All Property	/ You Own or Have an	Interest in That You Did I	Not List Above	
F2 Do.	ou have other property	, of any kind you di	d not already liet?		

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

■ No

 $\hfill \square$ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known)

Joann King

Deb	tor 1 Joann King	Document	————	Case number (if known)	
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$90,000.00
56.	Part 2: Total vehicles, line 5	_	\$5,000.00		
57.	Part 3: Total personal and household items	s, line 15	\$900.00		
58.	Part 4: Total financial assets, line 36	_	\$7,350.00		
59.	Part 5: Total business-related property, line	e 45	\$0.00		
60.	Part 6: Total farm- and fishing-related prop	erty, line 52	\$0.00		
61.	Part 7: Total other property not listed, line	54 +	\$0.00		
62.	Total personal property. Add lines 56 throug	h 61	\$13,250.00	Copy personal property total	\$13,250.00
63.	Total of all property on Schedule A/B. Add	line 55 + line 62			\$103,250.00

Official Form 106A/B Schedule A/B: Property page 6 Case 16-28847-VFP Doc 1 Filed 09/30/16 Entered 09/30/16 17:22:48 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Joann King			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	r each exemption.					
	40 Lanark Ave Newark, NJ 07106-1022 Essex County	\$90,000.00		\$0.00	11 U.S.C. § 522(d)(1)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2007 Ford Edge 100000 miles Line from Schedule A/B: 3.1	\$5,000.00		\$3,775.00	11 U.S.C. § 522(d)(2)					
	Ellie Holli Golloddie 172. G.1			100% of fair market value, up to any applicable statutory limit						
	Used Household Good and Furnishings	\$500.00		\$500.00	11 U.S.C. § 522(d)(3) 400					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	Used Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)					
	Line nom schedule A/B. 11.1		100% of fair market value, up to any applicable statutory limit							
	Cash Line from Schedule A/B: 16.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)					
	Line from Soffedule PVD. 10.1			100% of fair market value, up to any applicable statutory limit						

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Case number (if known)

	coaim raing					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Santander Line from Schedule A/B: 17.1	\$300.00	•	\$300.00	11 U.S.C. § 522(d)(5)	
	Ellie Holli Golledale 742. TTT			100% of fair market value, up to any applicable statutory limit		
	Atlantic Health Line from Schedule A/B: 19.1	\$7,000.00		\$7,000.00	11 U.S.C. § 522(d)(5)	
	Line Ironi Schedule Arb. 19.1	Г		100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			ed on or after the date of adjustme	nt.)	
	☐ Yes. Did you acquire the property cover	red by the exemption wi	ithin 1,	215 days before you filed this case	?	
	□ No					
	☐ Yes					

Case 16-28847-VFP Doc 1 Filed 09/30/16 Entered 09/30/16 17:22:48 Desc Main Document Page 19 of 51 his information to identify your case:

Fill in this information to	identify your	case:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	n King					
First Na	ame	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Na	ame	Middle Name	Last Name			
United States Bankruptcy	Court for the:	DISTRICT OF NEW JERSEY				
Case number					_	if this is an led filing
						iod iiii ig
Official Form 106		Who Have Claims	Secureo	hy Property	A.I	12/15
Be as complete and accurate is needed, copy the Addition	as possible. If	two married people are filing toget ut, number the entries, and attach i	ther, both are equ	ually responsible for su	pplying correct informa	tion. If more space
number (if known). 1. Do any creditors have claim	me encured by	vour proporty?				
		is form to the court with your other	er schedules Yo	ou have nothing else to	o report on this form	
Yes. Fill in all of the		,	or somedates. Te	ou have nothing clock	o report on this form.	
Part 1: List All Secure		CIOW.				
		nore than one secured claim, list the cr	raditar caparataly	Column A	Column B	Column C
for each claim. If more than o	ne creditor has	a particular claim, list the other creditoral order according to the creditor's nar	ors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 HSBC Bank USA		Describe the property that secures	s the claim:	\$2,924.00	\$0.00	\$2,924.00
Creditor's Name		non exempt property if any	1			
26525 N Riverwoo Blvd Mettawa, IL 6004		As of the date you file, the claim is apply.	Check all that			
Number, Street, City, State	& Zip Code	Unliquidated				
Who owes the debt? Chec	k ono	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	k one.	☐ An agreement you made (such as		ured		
Debtor 2 only		car loan)	g-g			
Debtor 1 and Debtor 2 only	у	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least one of the debtors	and another	Judgment lien from a lawsuit				
☐ Check if this claim relate community debt	es to a	☐ Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account nur	mber <u>8810</u>			
Portfolio Recover Associates, LLC	ry	Describe the property that secures	s the claim:	\$992.00	\$0.00	\$992.00
Creditor's Name		Non exempt property if any	′			
PO Box 4115, De Concord, CA 945		As of the date you file, the claim is apply. □ Contingent	Check all that			
Number, Street, City, State	& Zip Code	Unliquidated				
Who owes the debt? Chec	k one	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as		ured		
Debtor 2 only		car loan)	3 3 3 3 3 3			
Debtor 1 and Debtor 2 only	у	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least one of the debtors	and another	Judgment lien from a lawsuit				
☐ Check if this claim relate community debt	es to a	☐ Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account nur	mber <u>0212</u>			

Official Form 106D

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Debtor 1 Joann King			Case numl	Case number (if know)						
First Name	Middle Na	me Last Name								
2.3 Seterus Inc		Describe the property that secures the o	claim: \$230	0,000.00	\$90,000.00	\$140,000.00				
Creditor's Name		40 Lanark Ave Newark, NJ 07106-1022 Essex County								
14523 Sw Millikan Beavertton, OR 97		As of the date you file, the claim is: Checapply. ☐ Contingent	ck all that							
Number, Street, City, State &	Zip Code	☐ Unliquidated								
Who owes the debt? Check	one.	Disputed Nature of lien. Check all that apply.								
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortgage or secured car loan)								
☐ Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic's lien)								
At least one of the debtors a		☐ Judgment lien from a lawsuit								
☐ Check if this claim relates to a community debt		Other (including a right to offset) Mortgage								
11/ Ac	ened /07 Last tive !4/15	Last 4 digits of account number	4199	_						
Add the dollar value of your	r entries in Co	olumn A on this page. Write that number	here:	\$233,916.00						
If this is the last page of you Write that number here:	ur form, add t	he dollar value totals from all pages.		\$233,916.00						
Part 2: List Others to Be	Notified for	a Debt That You Already Listed								
trying to collect from you for	a debt you ov ne debts that	e notified about your bankruptcy for a del we to someone else, list the creditor in Pa you listed in Part 1, list the additional cre is page.	art 1, and then list the	collection agency	here. Similarly, if y	ou have more				
Name, Number, Street, RAS Citron, LLC	City, State & Z	lip Code	On which line in Par	rt 1 did you enter th	e creditor? 2.3					
130 Clinton Rd, S Fairfield, NJ 0700			Last 4 digits of acco	ount number						

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		Document	Page	21 of	51		
Fill in this info	rmation to identify your ca	se:					
Debtor 1	Joann King						
	First Name	Middle Name	Last Nam	е			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	Δ			
			Lastivani	C			
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY					
Case number							
(if known)						☐ Check	if this is an
						amend	ded filing
Official Ear	rm 106E/F						
		المعتريم ممالا مريوالا م	Claim	_			40/4E
		O Have Unsecured Part 1 for creditors with PRIORITY					12/15
eft. Attach the Co	ditors Who Have Claims Secure ontinuation Page to this page. umber (if known).	ed by Property. If more space is r If you have no information to rep	needed, co oort in a Pa	opy the Par art, do not	t you need, fill it out, file that Part. On the t	number the entries i op of any additional	n the boxes on the pages, write your
Part 1: List	All of Your PRIORITY Unse	ecured Claims					
 Do any cred 	litors have priority unsecured of	claims against you?					
☐ No. Go to	Part 2.						
Yes.							
identify what possible, list	type of claim it is. If a claim has the claims in alphabetical order a	If a creditor has more than one prior both priority and nonpriority amount according to the creditor's name. If y cular claim, list the other creditors in	s, list that you have n	claim here a	and show both priority a	nd nonpriority amour	its. As much as
	•	e the instructions for this form in the		booklet.)			
	•			ŕ	Total claim	Priority amount	Nonpriority amount
2.1 Intern	al Revenue Service	Last 4 digits of accour	nt number	8790	\$2,437.00	\$2,437.00	_
•	Creditor's Name	Alam Whan was the dahting		2042		-	_
	alized Insolvency Opera ox 7346	tion When was the debt inc	currea?	2013		-	
Philac	delphia, PA 19114						
	Street City State Zlp Code	As of the date you file,	, the claim	is: Check	all that apply		
_	red the debt? Check one.	☐ Contingent					
■ Debtor	1 only	☐ Unliquidated					
☐ Debtor 2	2 only	☐ Disputed					
☐ Debtor	1 and Debtor 2 only	Type of PRIORITY uns	ecured cl	aim:			
☐ At least	one of the debtors and another	☐ Domestic support ob	oligations				
☐ Check i	if this claim is for a community	y debt Taxes and certain ot	ther debts	you owe the	government		
	n subject to offset?	☐ Claims for death or p	personal in	jury while yo	ou were intoxicated		
■ No		☐ Other. Specify					
☐ Yes		. ,					_

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Page 22 of 51 Case number (if know) Debtor 1 Joann King 2.2 \$2,180.00 **Internal Revenue Service** Last 4 digits of account number 8790 \$2,180.00 \$0.00 Priority Creditor's Name **Centralized Insolvency Operation** When was the debt incurred? 2012 PO Box 7346 Philadelphia, PA 19114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes 2.3 State of New Jersey Last 4 digits of account number 8790 \$593.00 \$593.00 \$0.00 Priority Creditor's Name **Bankruptcy Section** When was the debt incurred? 2014 **PO Box 245** Trenton, NJ 08695-0245 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Total claim

Part 2.

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Debtor 1 Joann King Case number (if know) 4.1 \$658.00 **First Premier** Last 4 digits of account number 1938 Nonpriority Creditor's Name Opened 06/13 Last Active 601 S Minneapolis Ave When was the debt incurred? 11/24/13 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.2 **First Premier** 0479 Last 4 digits of account number \$421.00 Nonpriority Creditor's Name Opened 5/23/13 Last Active 601 S Minneapolis Ave When was the debt incurred? 11/24/13 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Online Collections** Last 4 digits of account number 2611 \$181.00 Nonpriority Creditor's Name Po Box 1489 When was the debt incurred? **Opened 10/12** Winterville, NC 28590 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Imaging Consultants Essex ☐ Yes

Official Form 106 E/F

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Case number (if know)

Debtor	¹ Joann King		Case number (if know)								
4.4	Senex Services Corp	Last 4 digits of account number	92N1	\$125.00							
	Nonpriority Creditor's Name 3333 Founders Rd 2nd Floor	When was the debt incurred?	Opened 07/13								
	Indianaoplis. IN 46268										
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply								
	Who incurred the debt? Check one.										
	■ Debtor 1 only	☐ Contingent									
	☐ Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	□ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt	Obligations arising out of a sep	paration agreement or divorce that you did not								
	Is the claim subject to offset?	report as priority claims									
	No	☐ Debts to pension or profit-shar	ing plans, and other similar debts								
	Yes	Other. Specify Saint Bar	nabas Medical Center								
4.5	Senex Services Corp	Last 4 digits of account number	41N1	\$75.00							
	Nonpriority Creditor's Name			******							
	3333 Founders Rd 2nd Floor	When was the debt incurred?									
	Indianaoplis, IN 46268										
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply									
	Who incurred the debt? Check one.										
	■ Debtor 1 only	☐ Contingent									
	☐ Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	■ No	lo Debts to pension or profit-sharing plans, and other									
	Yes	■ Other. Specify Saint Barr	nabas Medical Cente								
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed									
5. Use th is tryir have r	is page only if you have others to be notified ng to collect from you for a debt you owe to s	about your bankruptcy, for a debt that someone else, list the original creditor lat you listed in Parts 1 or 2, list the ad	you already listed in Parts 1 or 2. For example, in Parts 1 or 2, then list the collection agency h ditional creditors here. If you do not have additi	ere. Similarly, if you							
	nd Address	On which entry in Part 1 or Part 2 did yo	_								
Fst Pr	emier Minnesota Ave		Part 1: Creditors with Priority Unsecured Claims								
	Falls, SD 57104		Part 2: Creditors with Nonpriority Unsecured Cla	aims							
		Last 4 digits of account number									
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo									
	emier Minnesota Ave		☐ Part 1: Creditors with Priority Unsecured Claims								
	Falls, SD 57104		Part 2: Creditors with Nonpriority Unsecured Cla	aims							
		Last 4 digits of account number									
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?								
	Services Corp	Line 4.4 of (Check one):	\square Part 1: Creditors with Priority Unsecured Claims	;							
	ounds Rd apolis, IN 46268		Part 2: Creditors with Nonpriority Unsecured Cla	aims							
aiuii	apono, ni 10200	Last 4 digits of account number									
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?								
	Services Corp		\square Part 1: Creditors with Priority Unsecured Claims	3							
	ounds Rd	I	Part 2: Creditors with Nonpriority Unsecured Cla	aims							
ındıan	apolis, IN 46268										

Official Form 106 E/F

Debtor 1 Joann King

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,210.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,210.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,460.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,460.00

Last 4 digits of account number

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Fill in this infor				
Debtor 1	Joann King			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				☐ Check if this i

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			-
	City		State	ZIP Code	
2.5			·		
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	,		3.		

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		Docume	ent Page 27 d	of 51	
Fill in this	information to identify your	case:			
Debtor 1	Joann King				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case numb	hor				
(if known)				г	☐ Check if this is an
					amended filing
neople are ill it out, anyour name 1. Do y No Yes 2. With Arizon:	filing together, both are equ nd number the entries in the and case number (if known) you have any codebtors? (If	ally responsible for supp boxes on the left. Attach . Answer every question you are filing a joint case, of the lived in a community pr . Nevada, New Mexico, Pu	olying correct informate the Additional Page to the Additional Page	r y? (Community property states	copy the Additional Page, Additional Pages, write
in line Form out Co	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with y sure you have listed the credition. Use Schedule D, Schedule Column 2: The creditor to	tor on Schedule D (Official le E/F, or Schedule G to fill
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that a	
3.1	Name			Schedule D, line	
	INAITIC			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street	_		_	
(City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
-	Niverhous				_
	Number Street City	State	ZIP Code		
	,		0000		

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Eill	in this information to identify your c	200:						
	otor 1 Joann King	ase.						
	otor 2 puse, if filing)							
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	ERSEY					
	se number nown)				□ A		ed filing	stpetition chapter ing date:
0	fficial Form 106I				N	IM / DD/ Y	YYYY	
S	chedule I: Your Inc	ome						12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp ith you, do not include	ouse is living	ving with ion about	you, incl	ude informationuse. If more s	on about your space is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing	spouse
	If you have more than one job,	Employment status	■ Employed		☐ Employe		oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed				mployed	
	employers.	Occupation	Housekeeping					
	Include part-time, seasonal, or self-employed work.	Employer's name	VA Medical Cente	r				
	Occupation may include student or homemaker, if it applies.	Employer's address	385 Tremont Ave East Orange, NJ 0	7018				
		How long employed the	here? 34 Years			_		
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to repo	ort for any	line, write	\$0 in the	space. Include	your non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information f	or all emp	loyers for	that perso	on on the lines t	pelow. If you need
					For Dek	otor 1	For Debtor non-filing s	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$	3	,352.27	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3. +\$		0.00	+\$	N/A

3,352.27

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Joann King	_	Case	number (if known)			
				For	Debtor 1		Debtor 2 or	
	Con	y line 4 here	4.	\$	3,352.27	non-	filing spouse N/A	
				*-	0,002.21	<u> </u>		
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,332.93	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify: credit union car	5h.+	_	747.50		N/A	
		credit union loans		\$_	801.67	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,882.10	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	470.17	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$-	0.00	\$-	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Son contribution	8h.+	· —	300.00	. —	N/A	
		Hartford disability		\$_ \$	1,599.00	\$	N/A	
		Daughter contribution		Ф _	300.00	\$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,199.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,669.17 + \$_		N/A = \$ 2,6	69.17
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depend				chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 2,6	69.17
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	1?				Combined monthly inc	come
		Yes. Explain: October 2018 receive deceased husband's socia	al secu	rity a	pproximately	\$800.0	00 monthly.	

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:					
Deb		Joann King					if this is:	
	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEW JERSEY		<u></u>	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
Be a	as complete a	and accurate as	possible.	. If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are equa any addition	lly responsible fon nal pages, write y	or supplying correct your name and case
Part	t 1: Descr	ibe Your House	hold					
1.	■ No. Go to □ Yes. Doe □ N	o line 2. s Debtor 2 live	•	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	ehold of Debto	or 2	
2.		e dependents?	■ No	ar 1 01111 1000 2, <i>Expons</i>	Tor Coparato Frouse	mora or Debte		
	Do not list Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	·							□ No
								☐ Yes ☐ No
								☐ Yes
								□ No □ Yes
3.	Do your exp	enses include		No				⊔ Yes
	•	f people other t d your depende	han ┌	Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the	ude expense value of such ficial Form 10	n assistance an	non-cash d have ind	government assistance i cluded it on Schedule I: \	f you know our Income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgage	e 4. \$		1,128.11
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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ebtor 1 Jo	oann King	Case num	ber (if known) _	
. Utilities:	:			
	ectricity, heat, natural gas	6a.	\$	295.00
6b. W	ater, sewer, garbage collection	6b.	\$	45.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	260.00
	ther. Specify:	6d.	\$	0.00
	nd housekeeping supplies	7.	\$	200.00
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.	\$	70.00
•	al care products and services	10.	\$	0.00
	and dental expenses	11.	\$	0.00
	ortation. Include gas, maintenance, bus or train fare.	11.	Ψ	0.00
	nclude car payments.	12.	\$	250.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ble contributions and religious donations	14.	·	0.00
. Insuran	<u> </u>		<u> </u>	0.00
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	fe insurance	15a.	\$	0.00
15b. He	ealth insurance	15b.	·	0.00
	ehicle insurance	15c.	·	215.00
	ther insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20		<u> </u>	0.00
Specify:	, , ,	16.	\$	0.00
	ent or lease payments:		<u> </u>	0.00
	ar payments for Vehicle 1	17a.	\$	0.00
	ar payments for Vehicle 2	17b.	·	0.00
	ther. Specify:	17c.	·	0.00
	ther. Specify:	17d.	·	0.00
	lyments of alimony, maintenance, and support that you did not repo		Ψ	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 1		\$	0.00
	ayments you make to support others who do not live with you.		\$	0.00
Specify:	, , , , , , , , , , , , , , , , , , , ,	19.		
. Other re	eal property expenses not included in lines 4 or 5 of this form or on	Schedule I: Yo	our Income.	
	ortgages on other property	20a.		0.00
20b. Re	eal estate taxes	20b.	\$	0.00
20c. Pr	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
	aintenance, repair, and upkeep expenses	20d.	\$	0.00
	omeowner's association or condominium dues	20e.		0.00
Other: S	Specify:	21.	·	0.00
. • • • • • • • •			Γ	0.00
. Calculat	te your monthly expenses			
22a. Add	d lines 4 through 21.		\$	2,463.11
22b. Cop	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2	\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	2,463.11
			· —	
	te your monthly net income.		_	
	opy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,669.17
23b. Co	opy your monthly expenses from line 22c above.	23b.	-\$	2,463.11
	ubtract your monthly expenses from your monthly income.	222	\$	206.06
Th	ne result is your monthly net income.	23c.	Ψ	200.00
For exam	expect an increase or decrease in your expenses within the year af ple, do you expect to finish paying for your car loan within the year or do you expe on to the terms of your mortgage?			e or decrease because o
	- · · · · · · · · · · · · · · · · · · ·			
■ No.				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Joann King				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSE	Υ		
Case number					
(if known)					☐ Check if this is an amended filing
		n Individual D			12/15
obtaining mone years, or both. 1		le bankruptcy schedules or a connection with a bankrup 519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attorney	to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				cy Petition Preparer's Notice, I Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summar	y and schedules filed	d with this declaration ar	nd
X /s/ Joa	ann Kina		X		
Joann			Signature of	Debtor 2	
Date ,	July 29, 2016		Date		

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=:11 :-	n this inform	nation to identify your				
			case.			
Debt	or 1	Joann King First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case (if know	e number wn)					Check if this is an amended filing
Sta Be as	complete a	of Financial A	ble. If two married people a attach a separate sheet to		ankruptcy equally responsible for sup additional pages, write you	
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. \	What is your	current marital statu	s?			
[☐ Married ■ Not mar	ried				
2. [During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
I	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	٠.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
[■ No □ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	l amount of income you	u received from all jobs and a	g a business during this yeall businesses, including parter together, list it only once ur		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calenda uary 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$65,229.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known)

Debtor 1 Joann King

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
For the ca (January 1	alend 1 to I	lar year be December	fore that: 31, 2014)	■ Wages, commissions, bonuses, tips	\$60,276.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
For the ca		lar year: December	31, 2013)	■ Wages, commissions, bonuses, tips	\$74,507.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
For the ca		ar year: December	31, 2012)	■ Wages, commissions, bonuses, tips	\$68,716.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		Operating a b	usiness	
List ea	ach s No	,	he gross inco	se and you have income that yome from each source separate	,	•		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	me	Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
_		Neither De individual p	ebtor 1 nor E primarily for a	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househol ore you filed for bankruptcy, di	mer debts. Consumer debt d purpose."			I(8) as "incurred by an
		□ Yes	List below e paid that cr not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/19 and every 3 years	nts for domestic support oblig nis bankruptcy case.	ations, such as chi	ld support a	nd alimony. Also, do
■ Y	es.			or both have primarily consure you filed for bankruptcy, die		I of \$600 or more?		
		■ No.	Go to line 7					
		□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
Credi	itor's	Name and	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **Federal National Mortgage Assoc Foreclosure** Superior Court Essex Pending vs Joann King County □ On appeal F-012663-16 □ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο П Yes

Case 16-28847-VFP

Joann King

Debtor 1

Doc 1

Filed 09/30/16

Document

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ase number (*if known*)

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Pa	rt 5: List Certain Gifts and Contributions									
	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No									
	☐ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value						
	Person to Whom You Gave the Gift and Address:									
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No									
	Yes. Fill in the details for each gift or contril									
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value						
Pa	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?									
	■ No □ Yes. Fill in the details.									
	how the loss occurred Inclu	cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending trance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lose						
	tt 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy.	, did you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone you						
	consulted about seeking bankruptcy or prepare			, , , ,						
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment						
	Person Who Made the Payment, if Not You									
	Harvey I Marcus 250 Pehle Avenue, Suite 200 Saddle Brook, NJ 07663	\$1500.00	7/27/16	\$1,500.00						
	Greenpath 38505 Country Club Dr, Suite 210 Farmington, MI 48331-3429	\$50.00	7/27/16	\$50.00						
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.									
	No Yes. Fill in the details.									
	Person Who Was Paid	Description and value of any property	Date nayment	Amount of						
	Address	transferred	Date payment or transfer was made	payment						

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

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Case number (if known)

Debtor 1 Joann King

	Include both outright transfers and transfers in include gifts and transfers that you have alreated. No Yes. Fill in the details.	nade as security (such as	the granting of a se	ecurity interest or mortgage on your	property). Do not
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-put No		ny property to a se	elf-settled trust or similar device	of which you are a
	Yes. Fill in the details.				
	Name of trust	Description and	value of the prope	rty transferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Ir	netrumente Safe Denosi	t Boyes and Store	ana Unite	
Ιαι	List of Gertain Financial Accounts, in	istruments, sale beposi	it boxes, and store	age onits	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market,				
	houses, pension funds, cooperatives, asso			r doposit, silaros in balino, sroal	amono, bronorago
	No				
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, any	safe deposit box or other depos	itory for securities,
	No				
	☐ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1 ye	ear before you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Contro	ol for Someone Else			
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any property	you borrowed from, are storing t	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		escribe the property	Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Joann King

	regulations controlling the cleanup of these su Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental l	law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,
Rep	port all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any ■ No □ Yes. Fill in the details.	release of hazardous material?		
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini ■ No □ Yes. Fill in the details.	strative proceeding under any envi	ironmental law? Include settlements a	and orders.
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Ра	rt 11: Give Details About Your Business or Cor	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Describe the nature of the business

Name of accountant or bookkeeper

No

Business Name

Address

Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

No. None of the above applies. Go to Part 12.

Name **Address**

(Number, Street, City, State and ZIP Code)

Date Issued

☐ An owner of at least 5% of the voting or equity securities of a corporation

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Page 39 of 51 Case number (if known) Document Debtor 1 Joann King Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joann King Signature of Debtor 2 Joann King Signature of Debtor 1 Date July 29, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	Fill in this information to identify your case:					
Debtor 1	Joann King					
Debtor 2 (Spouse, if filing)						
United States B	United States Bankruptcy Court for the: District of New Jersey					
Case number (if known)						

Check	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	■ 3. The commitment period is 3 years.						
☐ 4. The commitment period is 5 years.							
	☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
10 th	Il in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tota bouses own the same rental property, put the income from that	month per al by 6. Fill	iod would I in the re	be March 1 throusult. Do not includ	ıgh Augı le any in	ust 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
					Colum Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	3,446.17	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly por you or your dependents, including child support from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include ld, your c	e regulai depende	r contributions ents, parents,	\$	100.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00					
	Net monthly income from rental or other real property	•	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Joann King			Case number	(if known)			
				0.11		0 / 5		
				Column A Debtor 1		Column B Debtor 2 non-filing	or	
7. Int	erest, dividends, and royalties			\$	0.00	\$		
	employment compensation			\$	0.00	\$		-
	not enter the amount if you contend to Social Security Act. Instead, list it he		efit under					-
	For you	\$.00					
	For your spouse							
bei	nsion or retirement income. Do not nefit under the Social Security Act.	•		\$	0.00	\$		_
Do red do	come from all other sources not list onot include any benefits received und ceived as a victim of a war crime, a cri mestic terrorism. If necessary, list othe al below.	der the Social Security Act or payme me against humanity, or international	nts al or					
	The Hartford disability ber	nefit		\$1,	066.00	\$		-
				\$	0.00	\$		-
	Total amounts from separate pa	ages, if any.	+	\$	0.00	\$		-
	ilculate your total average monthly ch column. Then add the total for Column		\$	4,612.17	+ \$ _		= \$_	4,612.17
Part 2:	Determine How to Measure You							onthly income
12. Co	py your total average monthly inco	me from line 11 ck one:					\$	4,612.17
	You are not married. Fill in 0 below							
	You are married and your spouse is	s filing with you. Fill in 0 below.						
	You are married and your spouse is	s not filing with you.						
		ed in line 11, Column B, that was NC e spouse's tax liability or the spouse						
	Below, specify the basis for excludi adjustments on a separate page.	ng this income and the amount of inc	come de	voted to each	purpose.	If necessar	y, list add	itional
	If this adjustment does not apply, e	nter 0 below.						
			- \$ \$		_			
			-		_			
	Total		\$	0.0	O Col	py here=>		0.00
14. Y	our current monthly income. Subtr	act line 13 from line 12.					\$	4,612.17
15. C	alculate your current monthly inco	me for the year. Follow these steps	s:					
1	5a. Copy line 14 here=>						\$	4,612.17
	Multiply line 15a by 12 (the numb	oor of months in a year)					v	10
		er or months in a year).						12

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Debt	or 1	Joan	nn King		Case number (if known)		
16	. Cal	culate	the median family income that applies to	you. Follow the	se steps:		
	16a	. Fill in	the state in which you live.	NJ			
	16b	. Fill in	the number of people in your household.	1			
	16c	. Fill in	the median family income for your state and	size of househo	old.	\$	61,347.00
			nd a list of applicable median income amount actions for this form. This list may also be ava				
17	. Hov		ne lines compare?	mable at the bar	mapley delike emee.		
	17a	. =			age 1 of this form, check box 1, <i>Disposable in</i> culation of Your Disposable Income (Official F		
	17b	. 🗆		ulation of You	is form, check box 2, <i>Disposable income is de</i> r Disposable Income (Official Form 122C-2		
Par	t 3:	Ca	culate Your Commitment Period Under 11	U.S.C. § 1325((b)(4)		
18.	Cop	y you	r total average monthly income from line	11 .		\$	4,612.17
19.	con	tend th	e marital adjustment if it applies. If you are lat calculating the commitment period under ncome, copy the amount from line 13.	e married, your 11 U.S.C. § 132	spouse is not filing with you, and you 5(b)(4) allows you to deduct part of your		
	19a	. If the	marital adjustment does not apply, fill in 0 or	ı line 19a.		- \$	0.00
	19b	Subt	ract line 19a from line 18.			\$_	4,612.17
20.			your current monthly income for the year			œ.	4,612.17
	20a					Φ_	<u> </u>
		Multi	oly by 12 (the number of months in a year).				x 12
	20b	. The r	result is your current monthly income for the	ear for this part	t of the form	\$	55,346.04
				,		Ľ-	<u>, </u>
	20c	Сору	the median family income for your state and	size of househ	old from line 16c	\$_	61,347.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by t	the court, on the top of page 1 of this form, ch	eck box 3,	The commitment
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise	ordered by the court, on the top of page 1 of	this form, o	check box 4, The
Par	t 4:	Sig	n Below				
	By s	signing	here, under penalty of perjury I declare that	the information	on this statement and in any attachments is t	rue and co	rrect.
>			n King				
		ann I	King e of Debtor 1				
		Jul	y 29, 2016				
	Ι Ε · · ·		/ DD / YYYY				
	-		cked 17a, do NOT fill out or file Form 122C-2		and 30 of that form, copy your autront monthly	incomo fra	m lino 14 chovo
	ii yC	u che	oned 170, IIII out Foith 1220-2 and iiie it with	una ioiiii. Oii iii	ne 39 of that form, copy your current monthly	IIICOITIE IIOI	n mie 14 abuve.

Debtor 1 **Joann King** Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2016 to 08/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: AHS Hospital

Income by Month:

6 Months Ago:	03/2016	\$1,172.99
5 Months Ago:	04/2016	\$1,757.25
4 Months Ago:	05/2016	\$0.00
3 Months Ago:	06/2016	\$0.00
2 Months Ago:	07/2016	\$0.00
Last Month:	08/2016	\$0.00
	Average per month:	\$488.37

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: VA Medical Center

Income by Month:

6 Months Ago:	03/2016	\$3,051.20
5 Months Ago:	04/2016	\$4,620.00
4 Months Ago:	05/2016	\$3,094.40
3 Months Ago:	06/2016	\$3,094.40
2 Months Ago:	07/2016	\$3,886.80
Last Month:	08/2016	\$0.00
	Average per month:	\$2,957.80

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Daughter contribution

Income by Month:

6 Months Ago:	03/2016	\$0.00
5 Months Ago:	04/2016	\$0.00
4 Months Ago:	05/2016	\$0.00
3 Months Ago:	06/2016	\$0.00
2 Months Ago:	07/2016	\$0.00
Last Month:	08/2016	\$300.00
	Average per month:	\$50.00

Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Son Contribution

Income by Month:

6 Months Ago:	03/2016	\$0.00
5 Months Ago:	04/2016	\$0.00
4 Months Ago:	05/2016	\$0.00
3 Months Ago:	06/2016	\$0.00
2 Months Ago:	07/2016	\$0.00
Last Month:	08/2016	\$300.00
	Average per month:	\$50.00

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Debtor 1 Joann King		Case number (if known)	
Line 10 - Income from all other	r sources		
Source of Income: The Hartfor	d disability benefit		

Income by Month:

6 Months Ago:	03/2016	\$0.00
5 Months Ago:	04/2016	\$0.00
4 Months Ago:	05/2016	\$1,599.00
3 Months Ago:	06/2016	\$1,599.00
2 Months Ago:	07/2016	\$1,599.00
Last Month:	08/2016	\$1,599.00
	Average per month:	\$1,066.00

Remarks: Began 4/3/16

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-28847-VFP Doc 1 Filed 09/30/16 Entered 09/30/16 17:22:48 Desc Main Document Page 49 of 51

United States Bankruptcy CourtDistrict of New Jersey

		District of few sersey						
In re	Joann King		Case No.					
		Debtor(s)	Chapter	13				
VERIFICATION OF CREDITOR MATRIX								
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.								
Date:	July 29, 2016	/s/ Joann King						
		Joann King						

Signature of Debtor

First Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Fst Premier 601 S Minnesota Ave Sioux Falls, SD 57104

HSBC Bank USA 26525 N Riverwoods Blvd Mettawa, IL 60045

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19114

Online Collections Po Box 1489 Winterville, NC 28590

Portfolio Recovery Associates, LLC PO Box 4115, Dept 922 Concord, CA 94524

RAS Citron, LLC 130 Clinton Rd, Ste 202 Fairfield, NJ 07004

Senex Services Corp 3333 Founders Rd 2nd Floor Indianaoplis, IN 46268

Senex Services Corp 333 Founds Rd Indianapolis, IN 46268

Seterus Inc 14523 Sw Millikan Way St Beavertton, OR 97005

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